

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date of Submission	07/07/2022 17:46 (SGT)
Reported by	Driver
Date of Accident	04/07/2022 13:30 (SGT)
Exact Location of Accident	CTE, Singapore
Additional Location Information	CTE towards city
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBD230H
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	Eleco Services Pte Ltd
Company Reg No	200208730R
Email Address	project@eleco.com.sg
Mobile Phone No	(Phone) +65-98799388
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Nv200
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	1500

INSURANCE COMPANY

Name of Insurance Company	Lonpac Insurance Bhd
Policy Number / Cover Note Number	Z22VC05011133

DRIVER

Name of Driver	Alvin Lim Yong Yuek
NRIC No	S7717362E
Date Of Birth	01/07/1977
Occupation	Outdoor

Date Of Driving Pass	13/11/2003
Driving experience	18 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98799388
Alt. Phone Number	-
Email Address	project@eleco.com.sg
Address	3 AMK Industrial Park 2A #04-10
Address complement	-
Postcode	568050
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

PASSENGER 1

Name	unknown
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Sengkang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18003438999
Alt. Police Station Phone No	(Fax) +65-63438939
Police Station Address	2 Sengkang Square #01-02
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

refer attached police report.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBF7430R
Vehicle Manufacturer	Nissan
Vehicle Model	Cabstar
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	Raju Arasu
Work Permit No	G5207701Q
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SHD3357K
Vehicle Manufacturer	Hyundai
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	Tong Peng Kwon
NRIC No	S1699437E
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	Alvin Lim Yong Yuek
Gender	Male
Phone No	(Phone) +65-98799388
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	GBD230H
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes

Describe Circumstance of the Accident

As Police Repⁿ.

Declaration

I/We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

7/7/22

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

SKETCH PLAN**IMPORTANT NOTICE**

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5. **Any false reporting may be referred to the Traffic Police Department for investigation.**
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

8. Consent under the Personal Data Protection Act (PDPA)

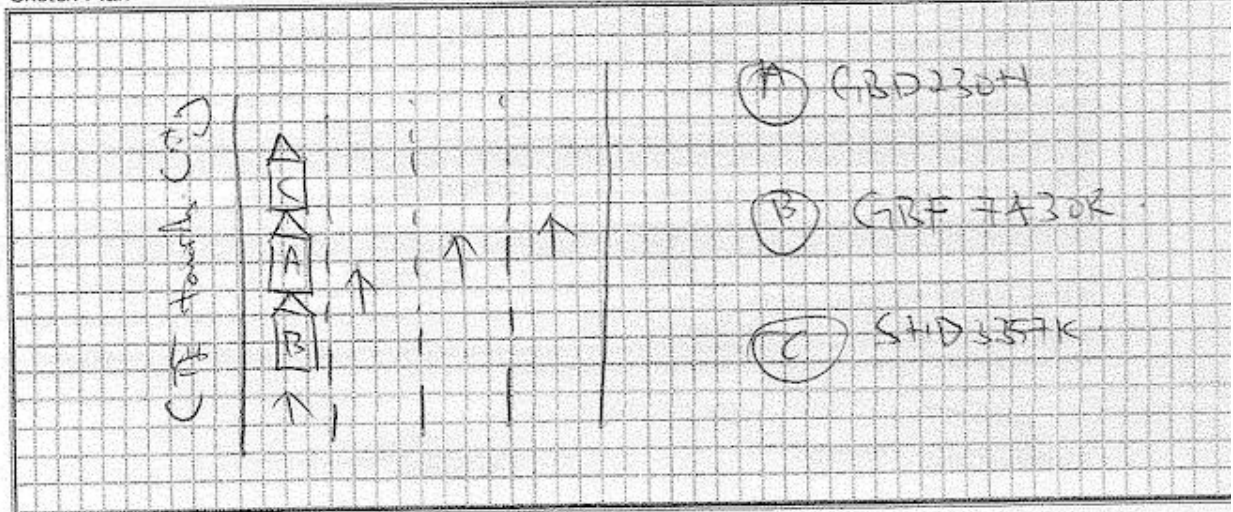
I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.
- (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

CO SERVICES PTE LTD
Reg. No. 200208730R (77)
Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time
7/1/22

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan





























**SINGAPORE
POLICE FORCE**



T/20220705/2055

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Report No. T/20220705/2055

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report:

F /
Other NUR NADHIRAH BINTE
HASHIM

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
05/07/2022 14:44

Officer In Charge Of Case:
TP / GIT /
STAFF SGT SYED MUHAMMAD ISA BIN
OMAR ALHABSHEE
Contact No.: 65476187

Classification Of Case:

NP168



SINGAPORE POLICE FORCE



T/20220705/2055

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2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

Report No. T/20220705/2055

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/07/2022 14:44		Vide Report No.:		Station Diary No.: 89
Informant's Particulars				
Name of Informant: ALVIN LIM YONG YUEK		Address: APT BLK 351B ANCHORVALE ROAD #06-247 SINGAPORE 542351		
ID Type / ID No.: NRIC NO / S7717362E		Contact No.: Home/Office: Mobile: 98799388		
Nationality: SINGAPORE CITIZEN		Email: cupid77@gmail.com		
Sex: Male	Age: 45	Date of Birth: 01/07/1977	Type of Informant: Driver	
Race: Chinese		Language:	Institution / School Name:	
Occupation: Mechanical engineering technician		Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 04/07/2022 13:30	Type of Location: Straight Road
Location: CENTRAL EXPRESSWAY				
Weather: Sunny		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBD230H	Van				Slightly Damaged	2
GBF7430R	Lorry				Slightly Damaged	2
SHD3357K	Car				Slightly Damaged	4



**SINGAPORE
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T/20220705/2055

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545025
Tel No: 1800-343 8999

Report No. T/20220705/2055

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver:			
Name	ALVIN LIM YONG YUEK	ID No.	S7717362E
Related Vehicle	GBD230H (Van)	Contact No.	98799388
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	04/07/2022	Date Discharge	04/07/2022
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Driver:			
Name	TONG PENG KWON	ID No.	S1699437E
Related Vehicle	SHD3357K (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the 04/07/2022 at about 1330hrs, I was driving my company van, bearing the registration plate number GBD230H, along CTE towards city. While I was, next to Braddell Exit 10, parallel to the chevron line, with the intention to enter PIE. Due to the heavy traffic, there was a long queue to enter PIE. The taxi in front of me was stationary, thus, I stopped my van behind the taxi. I was at a complete stop when I then noticed from my rear-view mirror that one lorry, bearing the registration plate number GBF7430R, moving towards me at a speed. Shortly later, the lorry collided to the right rear of my van. I had stepped my brake paddle fully, however, due to the collision, my van surged forward and collided into the rear of the taxi. I felt pain on my chest and had trouble alighting my van, as such, the taxi driver assisted to call for ambulance. The ambulance made assessment on me and subsequently, I was conveyed to Tan Tock Seng Hospital. I was granted outpatient sick leave for 3 days, from 04/07/2022 to 06/07/2022 by the hospital.

My van sustained damages such as dents and scratches on the front bumper and right rear of the vehicle. My van rear light on the right was also broken. The taxi sustained dents and scratches on the rear bumper and the lorry sustained damages to the front bumper.

I wish to state that I do not have any in car camera in my van. I believe that there was an in-car camera in the taxi. I had taken pictures of the damages and noted down the particulars of the other drivers. I had also reported the accident to my company. While I was at the hospital, one traffic police officer met me and advised me to lodge a traffic accident report.

The particulars of the taxi driver is Tong Peng Kwon, S1699437E, SHD3357K and the particulars of the lorry driver is Raju Arasu G5207701Q, GBF7430R. I did not manage to take down their contact numbers.



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CONTINUATION OF REPORT